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Editorial: A Federal Response to AIDS September 14, 1988

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LATER THIS week, an AIDS bill is expected to come to the floor of the House. It is not the kind of comprehensive measure that many AIDS victims and others had hoped for. Nor is it as strong as the legislation recommended by the president's AIDS commission last June. Specifically, the bill does not expand current antidiscrimination laws to cover AIDS bias in housing, public accommodations, schools and jobs that do not receive federal funds. Such provisions remain too controversial and, in the view of the bill's principal sponsor, Rep. Henry Waxman, could not be passed at this time. Nevertheless, the bill that is ready for consideration is a good one and should be passed.

The proposal is in three parts, two of which are not really controversial. The first creates a National Commission on AIDS to advise Congress and the president on AIDS policy matters. The second provides for expedited and expanded research on the epidemic and the development of drugs for treatment and prevention. Except for some opposition by those who oppose mandatory personnel additions in specified federal agencies, this section should be passed without much debate. The final section provides \$ 400 million in grants to the states for expanded testing and counseling programs. With a few exceptions, it mandates confidentiality of records. Disclosure without the tested person's consent can be made, for example, to spouses, sexual partners and those who have shared needles with infected persons. Doctors can also inform blood and organ banks, undertakers and insurers (once the patient has died) and must send information, but not necessarily names, to state public health officials.

There is no opposition to any of these provisions, but attempts will be made to require wider testing and disclosure. Rep. Bill Dannemeyer, for example, wants to require states to offer routine testing to all hospital patients between 15 and 49. He and other conservatives would mandate tests for all prisoners upon entering and leaving confinement, and all marriage-license applicants in states where the rate of infection is more than 0.1 percent. Without these amendments, such decisions would be left to the states. The prison population deserves special concern; society has a special responsibility to protect those in its custody from this terrible disease. But the House Energy and Commerce Committee was right in saying that these policies can be developed at the local level. An impressive number of witnesses representing doctors, hospitals, corrections officials and state governments opposed the Dannemeyer proposals as unnecessary, expensive and intrusive on states' rights. Consideration at a later time may become necessary. But adoption of the amendments now would certainly dim prospects for the passage of this worthwhile legislation. It is best to move forward now on a bill with broad and deserved support.